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**** CONTINUING DATA ******* None - TVP

**** FOREIGN APPLICATIONS ******* None - TVP

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature: <u>[Signature]</u> Initials: <u>TVP</u>	STATE OR COUNTRY WA	SHEETS DRAWING 10	TOTAL CLAIMS <u>21</u> 17	INDEPENDENT CLAIMS <u>7</u> 4
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ADDRESS
26119 TDao 06/12/09

TITLE
State as a first-class citizen of an imperative language

FILING FEE RECEIVED 1104	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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